

CMTA MEMBERSHIP FORM

YES - I wish to apply for or renew my membership in the Chezzetcook - Musquodoboit Trail Association. I agree to receive communication from the Association via mail, e-mail and telephone regarding Association news and activities and to comply with the by-laws of the Association.

Family@\$15 Individual@\$10 Corporate@\$25 Donation \$____.

Total Enclosed \$ _____ Do you require a receipt? ____ Yes ____ No

The CMT is a volunteer organization. Would you like to share your interests and skills?

Name:

Address:

Postal Code:

Phone:

E-Mail:

Please make cheque payable to the Chezzetcook-Musquodoboit Trail Association and send application to:

Chezzetcook-Musquodoboit Trail Association
Po Box 129
Head of Chezzetcook, NS
B0J 1N0